

**CITY OF NEW BEDFORD
SEWER AND/OR STORM DRAIN PERMIT**

DATE 10-16-18

This certifies that permission is granted to

Tel

Cell: 774-328-1766
Home: (888) 992-1240

St. Louis St. Street

FLOW _____ G.P.D.

Mailing Address.

[illegible]

Name WATSON, GORD Address 35 PETER RD Tel. 822-2946
Type of Pipe Required: 1/2"

XP test driving suite - shub. 0
 of issue in Raker review. 1 to 2 added.

- Industrial User Discharge Permit No.

plus an Entrance Fee of \$

758

Date 10-10-2018 Receipt# 190

FOR INSPECTION ONLY A 24 HOUR NOTICE IS REQUIRED AND THE CONTRACTOR/APPLICANT IS

REQUIRED TO NOTIFY THE D.P.I.

Sewer
@ 508 979-1550 Press 4 Repair
PERMIT EXPIRES 1 YEAR

Storm Drain

other special rules as the Commissioner of

Signature of Property Owner or Representative

INSPECTOR'S REPORT

INSPECTED BY:

DATE:

COMMENTS:

APPROVED

DISAPPROVED

SIGNATURE

SKETCH PLAN